

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SHARON	18903	3/16/00
O.I.P.E. CLASSIFIER		10	3-22-00
FORMALITY REVIEW		69652	05/08/00
RESPONSE FORMALITY REVIEW		21076	12/15/00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	3	7	1/9
2	2	12	1/15
3	1	13	1/15
4	0	14	1/15
5	1	15	1/15
6	0	16	1/15
7	1	17	1/15
8	0	18	1/15
9	1	19	1/15
10	0	20	1/15
11	1	21	1/15
12	0	22	1/15
13	1	23	1/15
14	0	24	1/15
15	1	25	1/15
16	0	26	1/15
17	1	27	1/15
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26	0	36	1/15
27	1	37	1/15
28	0	38	1/15
29	1	39	1/15
30	0	40	1/15
31	1	41	1/15
32	0	42	1/15
33	1	43	1/15
34	0	44	1/15
35	1	45	1/15
36	0	46	1/15
37	1	47	1/15
38	0	48	1/15
39	1	49	1/15
40	0	50	1/15

Claim	Final	Original	Date
51	51	51	1/15
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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